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Rep. Susan Crosby, Chairperson  
Rep. Gloria Goeglein  
Sen. Steven Johnson  
Sen. Cleo Washington



Lay Members

Candace Backer  
Robert Bonner  
Dr. David Giles  
John Huber  
Galen Goode  
Gloria Kardee  
Jerri Lerch  
Amelia Cook Lurvey  
Janet Marich  
Judge Stephen Spindler  
Judith Tilton

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Authority: P. L. 37-1998

## **INDIANA COMMISSION ON MENTAL HEALTH**

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### **MEETING MINUTES**

**Meeting Date:** July 16, 1998  
**Meeting Time:** 12:30 P.M.  
**Meeting Place:** Westville Correctional Facility,  
Superintendent's Conference Room  
**Meeting City:** Westville, Indiana  
**Meeting Number:** 4

**Members Present:** Rep. Susan Crosby, Chairperson; Rep. Gloria Goeglein; Sen. Cleo Washington; Robert Bonner; Dr. David Giles; John Huber; Galen Goode; Gloria Kardee; Jerri Lerch; Janet Marich; Judge Stephen Spindler.

**Members Absent:** Sen. Steven Johnson; Candace Backer; Amelia Cook Lurvey; Judith Tilton.

[Note: Prior to the public meeting some members of the Indiana Commission on Mental Health toured the Westville Psychiatric Unit. A fact sheet and map of the Westville Correctional Facility was distributed to Commission members<sup>1</sup>.]

Representative Crosby called the meeting to order at 1:15 p.m. After an introduction by Commission members she called the first witness.

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<sup>1</sup> This document is on file in the Legislative Information Center, Room 230, Statehouse, Indianapolis, Indiana. The telephone number of the Legislative Information Center is (317) 232-9856, and the mailing address is 200 W. Washington St. Suite 301, Indianapolis, Indiana 46204-2789.

**Dwight W. Schuster, M.D.**, Psychiatrist and Neurologist, Clinical Professor Emeritus of Psychiatry, Indiana University School of Medicine

Dr. Schuster stated that the purpose of forensic psychiatry is to assist the public and courts by providing expert opinions about mental illnesses and mental retardation regarding civil and criminal problems. Only a small percentage of defendants who plead insanity are found to be incompetent or insane. Dr. Schuster explained the effects of the following court determinations:

Incompetent to Stand Trial: The defendant is either: (1) evaluated and treated by the Division of Mental Health until they are able to stand trial; or (2) they are found to be so mentally ill that they are committed to a State Hospital.

Not Guilty by Reason of Insanity: The individual is sent to a State Hospital for evaluation as to their dangerousness to themselves or others and their ability to care for themselves. They are then treated or released by the Division of Mental Health.

Guilty but Mentally Ill: The individual is sentenced to serve in the Department of Correction with the provision that the prisoner will receive proper psychiatric treatment.

Dr. Schuster said that there is a need to adequately treat guilty but mentally ill inmates.

Dr. Schuster stated that there have been reports of individuals who are held in jail because they are waiting for a bed at a mental hospital. This situation is dangerous for the prisoner and a difficult responsibility for jail personnel. With the closure of state mental hospitals the problem has become worse. Dr. Schuster classifies about 5% of the cases he has seen as the revolving door type - the individual is arrested, sent to a state hospital, is released, regresses, and is arrested again - starting the cycle over again.

Dr. Schuster believes the Isaac Ray Unit at Logansport does not have enough room for all the forensic cases in the state. States like Michigan and Virginia have well organized forensic centers. The purpose of a forensic center should be to provide better mental health services to the State of Indiana (including its courts and jails) and to try to avoid housing seriously mentally ill individuals in jails where the tragedies of suicide and murder occur every year. From his experience 90% of the individuals who plead insanity or incompetency are easily diagnosed as having or not having a significant mental illness. The other 10% require special diagnostic tools (e.g. brain scans, neuropsychological testing) to separate the malingerers from the genuinely sick.

Reputable national reports indicate that a sizable percentage of correctional inmates have a major mental illness or mental retardation (this does not include emotional distress or mild retardation). About 10% to 20% of the offenders need evaluation and treatment. Nationally the trend toward de-institutionalization has caused many mentally ill individuals to end up in the correctional system.

Dr. Schuster concluded that he believes in the common law principle that it is not right to punish some one who is "crazy". It takes good people in the fields of law and medicine to protect both the mentally ill and the public. One way that Indiana can accomplish this goal is to develop effective forensic programs.

While answering questions by the Commission, Dr. Schuster made the following points:

- Some states have established forensic facilities that are administered independently from both the department of correction and the division of mental health. He was not aware of any security problems at facilities that were not run by a department of correction. Because of medical advances, prisoners usually do not have to be in an acute setting for very long.
- Treatment of sexual predators has pretty much been a failure. Sexual predators should be kept in separate units from the general population.

**Clay Fattore**, Deputy Director, Division of Special Services, Department of Correction  
**Dr. Dean Rieger**, Medical Director, Division of Special Services, Department of Correction

**Dr. James Knopp**, Supervisor, Health Care Services

In answering questions put forth by the Commission Mr. Fattore, Dr. Rieger, and Dr. Knopp made the following responses:

- There are instances where prisoners are taken off drugs they were on before coming to prison. Some are on drugs like Ritalin which is effective in children but not adults. Others are placed on formulary drugs if it is likely to be effective.
- Haldol is not on the formulary but it can be obtained if it is deemed necessary.
- Paxil was added to the formulary last November.
- The New Castle facility is currently in the design phase. It is scheduled to open in 2000 and have about 128 inpatient beds for acute mental illness. The facility will have other types of beds for other types of patients.
- The new facility at New Castle should meet modified standards that the Division of Mental Health institutions are required to meet.

Commission members made closing comments that included the following:

- The Westville Psychiatric Unit is not conducive to treatment. The open dorms provide for warehousing prisoners instead of treating them. The prisoners are extremely lethargic from the excessive heat and poor ventilation in the dorms and what appears to be over-medication that sedates the offenders.
- Mentally ill offenders get priority in the placement list at Division of Mental Health institutions, this results in a backlog in placements by community mental health centers.

The meeting was adjourned at 2:30 p.m.